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Bib Data Sheet

CONFIRMATION NO. 8195

SERIAL NUMBER 09/943,438	FILING DATE 08/27/2001 RULE	CLASS 705	GROUP ART UNIT 2164	ATTORNEY DOCKET NO. 40655.4900	
APPLICANTS Shirely J. Provinse, Bethesda, MD; ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/228,236 08/25/2000 ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/03/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY MD	SHEETS DRAWING 10	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 6
Verified and Acknowledged Examiner's Signature _____ Initials _____					
ADDRESS Michelle Whittington Snell & Wilmer L.L.P. One Arizona Center 400 E. Van Buren Phoenix ,AZ 85004-2202					
TITLE System and method for account reconciliation					
FILING FEE RECEIVED 1202	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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CONFIRMATION NO. 8195

SERIAL NUMBER 09/943,438	FILING DATE 08/27/2001 RULE	CLASS 705	GROUP ART UNIT 3628	ATTORNEY DOCKET NO. 40655.4900
APPLICANTS Shirley J. Provinse, Bethesda, MD;				
** CONTINUING DATA ***** This appln claims benefit of 60/228,236 08/25/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/03/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		STATE OR COUNTRY MD	SHEETS DRAWING 10	TOTAL CLAIMS 34
Verified and Acknowledged Examiner's Signature _____ Initials _____				INDEPENDENT CLAIMS 6
ADDRESS 020322				
TITLE System and method for account reconciliation				
FILING FEE RECEIVED 1202	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	